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Articles in Today's Clips Friday, August 3, 2007

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No cause yet in baby death

Friday, August 03, 2007

LaNIA COLEMAN

THE SAGINAW NEWS

The death of an infant at a home day-care center remains a mystery.

Joshua C. Gruno died Wednesday at a licensed Saginaw Township day care.

Medical Examiner Dr. Kanu Virani said a Thursday autopsy for the 4-month-old was inconclusive.

"It showed nothing," he said. "There were no injuries. "The baby was lying face down in a crib with a blanket under it, so we haven't ruled out the possibility of asphyxia."

He is waiting for results of further tissue testing. Township police this morning refused to release the name of the day-care center's owner or the business' address.

Township police have said the day care owner put the baby down for a nap in the morning and when she checked on him at 11:30 a.m., he was "unresponsive."

The owner called 911 and performed CPR. Police also attempted resuscitation.

The baby is the son of Garth and Emily Gruno of Saginaw. He also leaves a brother, Jack, and a sister, Madison, plus grandparents Jack and Cindy Gruno and Angela and Kevin Alish of Saginaw and Mat and Sarah Doyle of Texas.

A funeral will take place at 10 a.m. Saturday at Snow Funeral Home, 3775 N. Center in Saginaw Township. Burial will follow in St. Andrews Cemetery.

Friends may call from 2 p.m. to 4 p.m. and 6 p.m. to 8 p.m. Friday, and from 9 a.m. until the time of service Saturday at the funeral home. v

LaNia Coleman covers law enforcement for The Saginaw News. You may reach her at 776-9690.

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Jury convicts dad in girl's death

Friday, August 03, 2007

By Danielle Quisenberry

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As a Jackson County judge read the guilty verdict Thursday, the grandmother of a 14-month-old killed in 2005 cupped her face with her hands and cried.

"I am so glad it is over," Cyndy Mathis said outside Chief Circuit Judge Chad Schmucker's courtroom, surrounded by other teary-eyed members of her family. "He took the life of a very loving, caring 14-month-old baby."

After about 11 hours of deliberation, a jury found young Amaree Gail Mathis' father, Shawndale Clark, 29, formerly of Blackman Township, guilty of felony murder for the second time. He is to receive a mandatory sentence of life in prison on Sept. 26.

A jury convicted him in 2006 of the same charge, but Schmucker on Feb. 1 overturned the conviction after Clark appealed to the Michigan Court of Appeals.

The higher court sent the case to Schmucker and an appellate defender moved for a new trial, or for a reduced conviction based on ineffective counsel and resulting prejudice.

In the 2006 trial, Clark was charged with first-degree child abuse, felony murder and open murder. The jury convicted him of the first two counts, but settled on a lesser conviction of manslaughter instead of open murder, as they were instructed was within their power.

They were not instructed they also could lessen the felony murder charge to second-degree murder or manslaughter.

This time jurors were instructed they could lessen the felony murder charge, but opted not to do so, causing even Assistant Prosecutor Allison Bates to wipe away tears. After the verdict was read, she embraced the victim's family.

Clark's lawyer, George Lyons, said he was surprised by the decision, especially after such a long period of deliberation.

"I think the verdict is inconsistent with the evidence," he said, after Clark's somber family had left the courthouse without commenting.

During the trial, Lyons argued that the girl -- left alone with her father the nights of June 16 and 17, 2005, as her mother, Jacqueline Mathis, went to work -- fell in the bathtub of their Blackman Township apartment.

Oakland County forensic pathologist, Dr. Ruben Ortiz-Reyes, said Amaree died of blunt-force trauma to the head, an injury that could not have resulted from merely a fall.

Kent County Medical Examiner Stephen Cohle confirmed Ortiz-Reyes' findings, but Lyons' expert, Dr. Bader Cassin, said it was possible she died from falling in the tub.

The Mathis family didn't buy the argument.

"(Clark) did it. He was the only one there. There is no other logical explanation," said Don Mathis, Jacqueline Mathis' father.

Don Mathis said it was difficult to go through the trial again, especially for his daughter, who took the stand for the second time.

The family had to see the graphic photographs of Amaree's autopsy, just as the emotional wounds created after her death were starting to heal, he said. "We all feel very relieved that it is over."

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KALAMAZOO GAZETTE

Dad charged with child abuse in 2 drownings

Friday, August 03, 2007

Gazette News Service

MUSKEGON -- The father of one of the two 5-year-old girls who drowned Wednesday in a backyard pool was watching movies and sleeping during the hours he was supposed to be caring for the children, authorities said.

A warrant charging Chillum Oudsema, 30, of Muskegon Township, with two counts of second-degree child abuse was issued Thursday. He is the father of Courtney Oudsema, one of the victims. The offense is a four-year felony.

The other victim was Serenity Meinders, who lives at the same address. The young cousins were found in the deep end of the unused and uncovered in-ground pool behind their home. The pool had about 6 feet of dirty water and debris in the deep end.

"The investigation revealed he was in a downstairs basement watching videos and apparently had fallen asleep at different points," Muskegon County Prosecutor Tony Tague said of Chillum Oudsema.

A 2-year-old who later was removed from the home by state child-welfare workers was in the basement with Chillum Oudsema. Tague said an ongoing investigation is "focusing on negligence and the total disregard for the safety of the children."

It still was unclear this morning how many people were staying at the home owned by 40-year-old Brian Meinders, police and prosecutors said.

"The house was an unfit place for children to be residing," Tague said. There was very little food in the house, dog feces and urine were all over the living room carpet, and the bed where one of the little girls slept had no sheets and a bed spring was poking through.

Muskegon Township Detective Ken Sanford said Laurie Stephens, 24, who is Serenity's mother, left for work about 7:30 a.m.

"The two 5-year-olds were in bed sleeping," he said, and Stephens' 2-year-old daughter, Kaden Meinders, was awake.

Stephens "comes home from work about 1:30 p.m. and doesn't see the girls anywhere," Sanford said. "She starts looking around for the girls and finds one of them in the pool."

Sanford said she started screaming and a neighbor, Steven Pfeiffer, came to her aid. He discovered the second child.

Tague said the children were in the deep end of the pool. One of them was floating and the other was submerged, he said.

Muskegon Township Police Chief Don Schrupf said that besides the stockade fence around the home, another chain-link fence surrounded the pool. However, if someone exited the rear door or garage door of the home he or she could go directly to the pool.

STURGIS JOURNAL

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Mother faces trial

[Print Page](#)

By Corky Emrick
Sturgis Journal

CENTREVILLE - St. Joseph County District Court Judge William Welty called the events surrounding the April death of Daniel Jacob Shepherd "plain and simple, a tragedy."

"A 15-year-old is dead," Welty said Wednesday at the conclusion of a preliminary examination for Shepherd's mother, Teresa LeaAnn Kleine.

The examination was continued from July 20.

Now, Kleine faces trial, pending an arraignment on Aug. 20.

She is charged with one count involuntary manslaughter, one count second-degree child abuse, three counts of delivery of marijuana and one count of maintaining a drug house.

The charges were made in connection with the death of Shepherd on April 28.

The first person to testify at Wednesday's hearing was Det./Sgt. Luis Rosado from the Sturgis Police Department.

Rosado said he interviewed Kleine after her son's death.

He testified that at first Kleine said the teens didn't smoke marijuana at her house, but later admitted she allowed it.

Rosado asked her if Jake had not been high, would she have called for an ambulance?

"Probably, I'm not sure ... I've never seen him that way before," Kleine told Rosado.

"I thought it was the marijuana."

Kleine also told police that she gave three of Jake's friends the left over marijuana, saying, "Jake would have wanted them to have it."

She told Rosado she didn't use it because she was on probation and gets tested for drug twice a month.

St. Joseph County Assistant Prosecutor John McDonough had introduced the autopsy report into evidence, which listed Shepherd's cause of death as methadone intoxication.

Rosado testified that at the time of the arrest, Kleine had two prescriptions in her purse. One was for 60 pills of diazepam, filled in early July. Fourteen were left, Rosado said.

Another prescription for 90 methadone pills was filled July 1, and was empty July 7.

The last witness to take the stand said she had seen Kleine give her son methadone and when asked about it, Kleine gave the drugs more discretely. The witness said that had gone on for several months.

The witness also said that on occasions she took Kleine to pharmacies to get vicodin and methadone prescriptions filled.

She said they went to Colon where Kleine obtained OxyContin, and once they went to a motel in Angola, Ind., to get methadone.

McDonough closed out his questioning by asking the witness about Kleine's appearance the day of Shepherd's death.

"She looked high, her eyes were glazed over. She looked dazed," the witness said.

Welty said the use of drugs in this case was "routine and carefree. That's hard to hear."

Police were called to the home the morning of April 28 after a report of an unresponsive 15-year-old. They found the boy's body just inside the door in the living room.

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Suspected drunken driver arrested

Friday, August 03, 2007

THE SAGINAW NEWS

MIDLAND -- Midland police jailed a Gratiot County man after an off-duty police officer reported him on suspicion of driving under the influence with a child in the car.

A state police sergeant called Midland officers when he saw the 38-year-old Middleton man leave the Plymouth Park pool with his 11-year-old son Tuesday, police said.

Officers arrested the driver and released the boy into his grandparents' custody.

The man likely will face drunken driving and child endangerment charges.v

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This is a printer friendly version of an article from **The Detroit News**
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August 3, 2007

Alma child found safe, but bizarre twist unfolds

Santiago Esparza / The Detroit News

Tuscola County sheriff's officials have canceled an Amber Alert for a 2-year-old boy initially thought to be in danger while in his father's care.

About 9 a.m. Thursday, a 32-year-old Alma man illegally entered his former girlfriend's home on Phelps Street. The woman is the mother of the man's son, sheriff's officials said. And he has custody of the boy.

While at the home, the boy cut his lip playing outside and left behind a bloody handprint that made investigators think the child may have been hurt by his father, sheriff's officials said. The man has a history of domestic violence offenses, sheriff's officials said.

The boy's mother was warned by someone not to go home because her former boyfriend was there, and she stayed away, sheriff's officials said.

Someone turned the natural gas on in the woman's home and then attempted to ignite it. Investigators are trying to determine if it was the former boyfriend.

The man was arrested about midnight in a motel in Clinton County. The son was not harmed.

You can reach Santiago Esparza at (313) 222-2127 or sesparza@detnews.com.

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ANTRIM COUNTY NEWS

Mancelona Resource Center:

A lifeline for Antrim County

BY JEFFRAY N. KESSLER
CONTRIBUTING WRITER

Ten years ago, the poor, the unfortunate, and the destitute, especially those in the Mancelona area, were lost and in desperate need of direction and assistance.

Someone noticed. Someone spoke. Someone began to listen. Someone wanted to help. Someone initiated change. Someone had a vision. Many began to have hope.

Ten years ago, Terry McLeod (then the Mancelona middle school principal) and much of his staff, estimated that they were spending as much as 90 percent of their time with troubled children; kids at risk and in crises of all kinds: mental, physical, emotional, psychological and social. Mr. McLeod has since died, but part of his legacy will be that he did not accept the status quo. He realized that he was in a losing game, and had the will and intelligence to seek change for his game plan.

This will keep the pilot light of hope alive for many. One of his first steps was to contact Gary Knapp who was Assistant Director of the Northwest Michigan Council of Governments. Mr. Knapp's focus was criminal justice at the time.

He and Mr. McLeod shared an awareness and knowledge of the impact that high numbers of needy people had on the society as a whole. They agreed that something had to change, and they began to compose a vision.

Fulfilling a vision takes dedication. Fulfilling the survival needs of many takes money. They applied for and received a \$400,000 grant from the Kellogg Foundation. The seeds of change could be planted, nurtured and harvested with such a boost. In the middle school, a new counselor was hired as well as a day care administrator. A Community Development Coordinator was added to oversee a flagship program called "Project S.H.A.R.E." ("School and Home Alliance for Restructured Education").

It became the metaphorical equivalent of calling in the cavalry, and to so many in the Mancelona community, the sound of bugles was music to their ears. They began to feel and then believe that they had not been forgotten, and that real help was on the way. At the middle school, change was almost immediate, visible, and dramatic.

A few years into the project, as if by divine fate, the state announced a new grant program out of its Health and Human Services department that would fund pilot ventures for three Family Services Centers. The new Mancelona effort had a head start on other applicants, and won a grant of \$154,000. That award became seed money for building of the resource center's current facility, but more importantly added terrific momentum to the programs' outreach capabilities and served as a ballistic bludgeon to the negative effects of poverty in the area. Services were expanded with the move out of the middle school facilities.

Amazing to all associated with the center is the fact that ten years have elapsed since its inception. An anniversary celebration is planned for early August, but already staff and administrators are thinking back on the many people who have been assisted and supported by the center. Services Coordinator Marcie Grabruck thinks back on the last decade and says, "There are literally 1,000's of people that we have helped, and they each have a different story."

Gary Knapp remains with the center as its Director of Service Operations.

He speaks with pride of his staff, their dedication, the progress that has been made, the continued broadening of their service area, and the facility that has become a convenient hub

of support.

"We have always called our efforts client based services. What we give is a leg up not a hand out. Our name is now a bit misleading because we service the entire county. No one in Antrim County is turned away for any reason."

The Resource Center's philosophy and vision are simple, whereas their financial support (from the school, the state, and continuing grants) can be a bit more complicated. Knapp describes their service objectives as, "Repositioning health and human services and improving the quality of life for our clients. This facility is located here because of a data-based decision that will allow us to serve the most people and be convenient for the largest number of people in need."

The location of the center defies a longstanding paradigm that social services need to be located in imposing governmental buildings typically at a county seat.

According to Knapp, "County seats are not always where most people in need are living with the effects of poverty, and those people often cannot afford transportation to those offices or are too intimidated to do so." With ten years of experience behind them, those working at the center have continued to evolve. Today, the facility is as welcome as it is welcoming to all.

Marcie Grabruck sees to that with her unending capacity for caring. According to Mr. Knapp, "Marcie embodies the function of this center. She knits all the services together."

Grabruck talks about everyone's commitment at the center to care about the "whole" person. "I have been trained by life experiences. I am the mom these people need when they come in. I'm not a trained this or that, just a common person who is not threatening to those who are in need."

Along with her kindness, however Grabruck has become an expert at recognizing peoples' needs and the resources available to answer those needs.

"I give them as much hope and opportunity as I can. We make a plan for each client and then we all try to help them reach their goals."

Those available resources to accomplish goals are extensive as typified by this real example shared by Mrs. Grabruck. Recently a pregnant teenage mother, toting an infant son came to the resource center seeking help. She was gathered in by the staff with open arms.

She is now part of the health department's W.I.C. (Woman, Infants and Children) food and nutrition program where she receives maternal and infant support services along with formula and food. She will be attended by a home health nurse when her new baby is born. She sees a dentist at the center and a breast-feeding specialist. Part of her plan also includes counselor support at the Women's Resource Center, and she visits the Ironmen Health Center for her own health as well that of her current child.

This woman is using only a fraction of what is available at no charge from the center. If you are a person with needs or know of a person who could use the kind of "whole person" care that is the center's focus, you owe it to yourself to visit.

The Mancelona Family Resource Center makes a statement about how we in Antrim County take care of those who have the least. If indeed this is how we as a society will be judged, we can be very proud of the work being done and offered there. There is goodness in this place, and as Mr. Knapp has describes their assistance as a "leg up", so it is rewarding for us all to see everyone with the ability, chance and honor to stand on their own two feet.

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Fewer American children are dying

August 3, 2007

By FRANK GREVE

McCLATCHY NEWSPAPERS

WASHINGTON — Things are looking up for Dr. Catherine Webb, a pediatric cardiologist at Northwestern University in Chicago. “When I was in training in the ‘80s, this was a pretty depressing specialty,” she said. “But it’s not anymore.”

True enough. The death rate from heart disease among children is about half what it was in 1980, according to a compendium of federal child-health statistics released last month.

Advertisement

Also down by roughly half are children’s death rates from birth defects, cancer, heart disease, pneumonia and flu, as well as injury-related child deaths from motor vehicle accidents, drowning, fires, falls, firearms and suffocation.

Death rates from all causes dropped 53% among children ages 1 to 4 and 45% among children ages 5 to 14. It adds up to survival for about 8,000 children a year who would’ve died in 1980.

“It’s terrific news,” said Harry Rosenberg, retired chief of the Mortality Statistics Branch of the National Center for Health Statistics, which is part of the Centers for Disease Control and Prevention.

Better medicine and new safety measures get much of the credit. So does expanded government health-insurance coverage for disadvantaged children, which gives them better access to medical care.

Parents deserve credit, too, said Dr. Frederick Rivara, a professor of pediatrics at the University of Washington in Seattle who specializes in injury reduction. They’re drinking and smoking less, for example, which reduces birth defects, fires and car crashes.

“Parents have gotten away from the idea that accidents happen and can’t be prevented,” Rivara said. “They know that child safety seats save lives and bike helmets prevent head injuries. They believe, as parents, that they can protect their kids. And that’s a big change.”

Only one leading killer — homicides — hasn’t relented significantly.

“They’re abuse cases, really,” Rivara said.

All racial groups showed similar declines from 1980 to 2004 — the latest year reported — but the death rate for black children remained nearly 40% higher when compared with those for Hispanics, Asians and non-Hispanic whites.

Also troubling: Most declines flattened by 2000, for unexplained reasons.

Death rates from each leading cause are reported in “America’s Children: Key National Indicators of Well-Being, 2007,” which can be read online at www.childstats.gov. Its tables describe trends for leading killers annually from 1980 through 2004.

Different explanations underlie each decline. Here are some of the key ones:

- Motor vehicles: deaths down from 7.4 to 3.3 per 100,000 for kids ages 1 to 4; down from 7.5 to 3.7 for kids ages 5 to 14.

Safer cars are a factor, but child safety seats and booster seats are the big difference. Used properly, safety seats cut child fatalities by 71%, according to the National Highway Traffic Safety Administration. Tennessee became the first state to require child safety seats in 1978. By 1985, all states did.

Compliance today is nearly total for infants but falls off with booster seats designed for bigger children. That’s one reason the mortality rate for older children has dropped less. In addition, older kids more often are allowed to ride in front seats, which are more dangerous.

The best predictor of children’s compliance is drivers who buckle up, and that’s risen from 12% in 1980 to 81%, NHTSA says.

- Birth defects: deaths down from 8.0 to 3.6 per 100,000 for children ages 1 to 4; down from 1.6 to 1.0 for children ages 5 to 14.

<http://www.printthis.clickability.com/pt/cpt?action=cpt&title=Fewer+American+children+are+dying&expi...> 8/3/2007

Improved prenatal diagnoses are a big factor, according to Dr. Howard Saal, the director of clinical genetics at Children's Hospital Medical Center in Cincinnati and a professor of pediatrics at the University of Cincinnati College of Medicine.

Ultrasound in particular — first offered regularly in the early '80s — helped to identify problem fetuses early enough to arrange for their treatment at specialty centers or, in especially severe cases, to terminate pregnancies. Refinements in surgical technique and advances in caring for critically ill children helped, too, Saal said.

- Fires and burns: deaths down from 6.1 to 1.5 per 100,000 for children ages 1 to 4; down from 1.5 to 0.7 for children ages 5 to 14.

Low-cost smoke alarms helped the most, said John R. Hall, chief research analyst at the National Fire Protection Association in Quincy, Mass. They've been found to cut fire-injury rates by as much as 80%. Half of U.S. homes had alarms in 1980; by 2000, 95% did.

Better trauma care and treatment helped, too. Today, few children with burns over less than 60% of their bodies die of them.

- Drownings: deaths down from 5.7 to 2.8 per 100,000 for children ages 1 to 4; down from 2.5 to 0.7 for children ages 5 to 14.

The vast majority of infant and toddler drownings occur in backyard pools, according to Sue Gallagher, the director of the Tufts Medical School's Health Communication Program in Boston. In the 1970s, Australia found that effective fencing can reduce those deaths by 80%.

U.S. jurisdictions followed suit. The best rules require four-sided fences with self-closing, self-latching gates. Three-sided fences with sliding glass doors on the fourth side do little good, according to Dr. Mick Ballesteros, an epidemiologist at the CDC's injury center in Atlanta.

- Cancer: deaths down from 4.5 to 2.5 per 100,000 for children ages 1 to 4; down from 4.3 to 2.5 for children ages 5 to 14.

Brenda Edwards and Lynn Ries, surveillance researchers at the National Cancer Institute, attribute the decline to earlier detection plus very aggressive treatment and better chemotherapeutic drugs. Leukemia, especially acute lymphocytic leukemia, the most common form of cancer in children, was the first to yield, said Dr. Alan Wayne, the clinical director for pediatric oncology at the National Cancer Institute.

"In the '60s, AL leukemia was considered a death sentence," Wayne said. "Now the five-year survival rates approach 80 to 90%." Brain tumors, the next most common cancer, have yielded somewhat to new surgical techniques and better radiation therapy, Wayne said, "but the improvements have been less dramatic."

- Heart disease: deaths down from 2.6 to 1.2 per 100,000 for children ages 1 to 4; down from 0.9 to 0.6 among children ages 5 to 14.

Cardiologist Webb credits "tremendous advances in surgery for congenital heart disease," plus advances in case management and medications for both congenital heart disease — the most common form among kids — and cardiomyopathy, a heart muscle disease.

- Pneumonia and influenza: deaths down from 2.1 to 0.7 per 100,000 in children ages 1 to 4; down from 0.6 to 0.2 in children ages 5 to 14.

Dr. Joseph Bocchini, the chair of the American Academy of Pediatrics committee on infectious diseases, attributes much of the decline to more effective delivery of flu vaccine to all children ages 6 months to 59 months. And children of all ages with underlying medical conditions that increase their flu risk, such as asthma, go to the head of the line.

- Suffocation: deaths down from 1.9 to 1.0 per 100,000 in children ages 1 to 4; flat at 0.9 for children ages 5 to 14.

The federal Consumer Product Safety Commission led the way with campaigns to reduce the width between slats in cribs, discourage soft bedding for infants and encourage parents to put babies to sleep on their backs to avert sudden infant death syndrome.

- Firearms: deaths down from 0.7 to 0.3 per 100,000 in children ages 1 to 4; down from 1.6 to 0.7 in children ages 5 to 14.

Since 1989, 18 states have passed child access-prevention laws that require gun locks and locked gun-storage cabinets. However, only in Florida and California — two of three states in which violations can be punished as a felony — have the laws had a statistically significant effect on child mortality, according to a 2006 study.

Peter Hamm, spokesman for the Brady Campaign to Prevent Gun Violence, headquartered in Washington, suspects that improvements in trauma care for gunshot victims helped reduce mortality, too.

- Falls: deaths down from 0.9 to 0.3 per 100,000 for kids ages 1 to 4; down from 0.3 to 0.1 for kids ages 5 to 14.

Most fatal falls for kids are from apartment windows. New York's rate dropped 96% after the city's health department required in 1979 that the landlords of multifamily buildings whose occupants included children younger than 11 provide \$3 window guards for them. Other urban areas followed suit.

McClatchy researcher Tish Wells and Jeanette Hudson, senior librarian for the Children's Safety Network in Newton, Mass., contributed to this report.

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Article published Aug 3, 2007

EDITORIAL

Debate over insuring kids ignores program's underuse

Congress is embroiled in a debate over renewal and expansion of the 10-year-old State Children's Health Insurance Program (SCHIP), an effort to provide health-care coverage for working-class children who neither have private insurance nor qualify for Medicaid.

The U.S. House has passed a measure to expand SCHIP from 6.6 million children to 11 million, increasing spending by \$50 billion to a total of \$75 billion over the next five years.

The Senate bill would boost enrollment to 9.8 million, raising the program's cost to \$60 billion over the next five years.

President Bush has threatened to veto any measure that goes beyond his recommended spending limit of \$30 billion over the next five years - an increase of \$5 billion.

Democrats have emphasized the need to provide health insurance coverage for all American children, while the Bush administration has said that the proposed congressional measures would shift thousands of children who currently have private insurance onto government coverage, placing an unnecessary burden on taxpayers.

We have to question Congress' push to greatly expand the SCHIP program when, if Michigan is any indication, the program already is greatly underutilized and indeed covers more impoverished adults than children.

Out of an estimated 160,000 uninsured children in Michigan in 2006 who were eligible for MICHild, as SCHIP is known in Michigan, only 32,782 were enrolled in the program. In fact, in order not to lose the federal funds because so few children were enrolled, Michigan in 2003 got approval to use MICHild funds to provide care for adults with incomes under \$3,049 a year. In 2006, more than 65,000 such adults received coverage through MICHild funds - twice the number of children served under the program.

Make no mistake, we think MICHild is a tremendous resource for working families in Michigan whose income is less than 200 percent of the federal poverty level. For a premium of about \$10 a month per family, qualifying children can have nearly all of their health-care needs paid for, including regular checkups, shots, emergency care, hospitalization, vision, hearing and dental care.

Why, then, are so many children who are eligible for MICHild not enrolled? We think that is the question that needs to be answered before the federal government considers doubling or tripling spending on the program.

If you think your family, or a family you know, may qualify for MICHild coverage, call toll-free 888-988-6300 for more information, or go online at <https://eform.state.mi.us/michild/intro1.htm>.



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Published August 3, 2007

Domestic violence emergency contacts

- EVE Inc., in Lansing: 372-5572, www.eveinc.org
- MSU Safe Place, on Michigan State University campus: 355-1100, www.msu.edu/~safe
- SIREN/Eaton Shelter, in Eaton County, 543-4915, www.sireneatonshelter.org
- RAVE, in Clinton County, (989) 224-4662, www.ravecs.org

Local domestic violence numbers

EVE Inc.

- Can house 30 at a time
- Fiscal Year 2005-2006, first three quarters (Oct. 1, 2005 to June 30, 2006):
Residents: 153 adults, 145 children
Nonresidential advocacy: 82
Shelter nights: 5,634 (for complete fiscal year)
- Fiscal Year 2006-2007, first three quarters (Oct. 1, 2006 to June 30, 2007)
Residents: 189 adults, 147 children
Nonresidential advocacy: 152
Shelter nights: 4,514

SIREN/Eaton Shelter

- 2006
Residents: 61 adults, 102 children
4,779 shelter nights
299 motel placements
Turn aways: 52 adults and 89 children
- 2007 through June
Residents: 46 adults, 77 children
2,150 shelter nights
112 motel nights
Turn aways: 21 adults and 42 children

RAVE (Relief After Violent Encounters) (Clinton County)

- Fiscal year 2005-2006
Residents: 310 women and children
Shelter nights: 4,130

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Rising violence challenges shelters

Domestic abuse centers packed; heat likely to make things worse

Seth Roy
Lansing State Journal

Last year, a woman sought refuge at EVE Inc. in Lansing with her children. Her 3-year-old son didn't speak.

"From the moment he was born, he wasn't allowed to talk," said Nancy Bates, community development director at EVE (End Violent Encounters).

"We get him into the children's program, he started to play with kids and he started to talk."

She said stories such as that keep her going even though EVE's shelter is consistently crammed, to the point the shelter can't house everyone who seeks help.

"It's unusual," Bates said, "because we have 30-plus capacity" for individuals.

She said EVE's shelter has been full for the past two months, and it has turned away 25 people in that time.

The SIREN/Eaton Shelter, in Eaton County, also is full, said Cindie Filko, executive assistant at the shelter. SIREN has had to turn away 20 families from January through June.

In Clinton County, RAVE (Relief After Violent Encounters) filled to capacity, though Executive Director Jody Smith said the shelter could take in more people if needed.

"We would never turn someone away who needed shelter," Smith said. "We could squeeze more in."

The number of domestic abuse victims and offenses has risen in Michigan since 2000.

Statewide, domestic violence offenses reported to law enforcement officials rose to 70,056 in 2005 from 45,676 in 2000, according to the Michigan State Police Uniform Crime Report.

Local numbers have risen as well: In 2005, Ingham County had 2,765 offenses, up from 2,103 in 2000.

The numbers for 2006 will be released later this year.

One possibility for the rise is the state's troubled economy, shelter officials have said. Other factors also might play a role.

"People will blame their behavior on alcohol, or drugs, or steroids," Bates said. "To us, there is no excuse."

She said summer statistics also tend to be higher.

"The numbers are going up," Bates said. "When the summer hits, and the heat hits, the number jumps."

Financial sources

She also said women might wait until summer to leave bad situations so they don't pull their children out of school.

On average, families stay in the shelter anywhere between nine and 30 days, Bates said. Shelters receive \$12 a day per person, up to 90 days, from the federal government.

Bates said EVE, also receives a little more than \$13,000 a year from county sources., and more than \$200,000 from the Michigan Domestic Violence Prevention and Treatment Board.

The yearly operating budget for the shelter is about \$750,000, she said.

Bates said EVE relies heavily on donations of clothes, supplies, toys and money to keep itself afloat.

As of now, though Bates said EVE would like to expand, it won't be possible without some help from the county.

"There's two houses on the other side of us right now," Bates said. "We would love to be able to buy them."

The cost for the houses, after purchasing and fixing them up, would probably be close to \$500,000, she said. That's money the shelter doesn't have.

Bates said if the county passed a millage worth even one-fourth of the one passed for Potter Park Zoo, the shelter's funding troubles wouldn't be an issue.

"That would be a dream," she said.

While domestic violence numbers seem to be on the rise, and local shelters are full, Ingham County Prosecutor Stuart Dunnings III said he couldn't tell if cases were increasing.

"It's like asking me if the water's 30 feet over my head or 50 feet over my head," he said.

Numerous factors

Dunnings said he takes time to talk with victims, and to explain the process to them. Some cases still don't go forward.

"Probably the biggest obstacle against prosecution is the victims themselves," he said, adding that they aren't to blame. "There's as many different reasons as there are victims, and their reasons are valid."

Children, pets and threats of further violence can keep a person from pressing charges.

"I've had one woman who said she couldn't imagine being in a relationship where there wasn't abuse," Dunnings said.

He said while he sees a lot of domestic violence cases, there are many that aren't reported.

Dunnings said he has focused on domestic violence issues since he's been in office, creating the Domestic Violence Unit in 1998.

Domestic Violence Prevention Coordinator Maria Valayil said the program, which employs about five victim advocate interns at a time, assisted 845 people from Oct. 1, 2006, to June 30, 2007.

"We try to be flexible in terms of what the person needs," she said.

"There's quite a bit of education, and helping people understand what their rights are, and what their options are."

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To Help

- St. Vincent Catholic Charities is accepting donations to furnish homes for newly arrived refugees.
- To make a donation please contact Bart Bullock at 323-4734 ext. 1419

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Agencies move to aid wave of new refugees

New arrivals get things they need to start new lives

Lindsay Machak
Lansing State Journal

Nasir Shaker, an Iraqi refugee, said the moment he stepped off the plane in Chicago on Sept. 24, 2001, he knew he was home.

"It's totally different here," the East Lansing man said. "It's like a zero to one hundred worlds difference."

Part of the Iraqi military in 1982, Shaker was captured by Iranian soldiers and held as a prisoner.

After fleeing to Syria, Shaker said he feels lucky to be able to begin a new life in East Lansing.

Now, local not-for-profits are rushing to accommodate a U.S. goal of bringing in 28,000 refugees such as Shaker - from all around the world - within three months.

Goal increased

President Bush set a goal in September 2006 to bring 41,000 refugees to the United States and recently increased that goal to 53,000 refugees before the end of September.

Officials said the United States has resettled about 25,000 refugees since the goal was set.

The new goal has caused Lansing to see a large increase in newly arriving refugees in recent months, said Julie Reynolds, the community relations and marketing manager at St. Vincent

Catholic Charities.

"The only big deal is trying to find homes for these people," she said.

St. Vincent Catholic Charities welcomes refugees by providing them with a furnished apartment within the city and helping them to settle in the community.

Getting resettled

According to the organization, the number of refugees arriving in Lansing has tripled in the past two months.

The organization provided a furnished home for Shaker, his wife, Suad Shaker, and daughter in 2001.

He remains separated from his son, who is still waiting for approval to relocate, and two daughters, who now have their own families in Iraq.

"My son calls and says 'Mommy, I wish I could come to America just for one day,' " Suad Shaker said. "I want him to be here so much."

The group is trying to find dressers, kitchen utensils and beds to be donated to furnish homes for the influx of incoming refugees.

Vincent Delgado, the co-director of the Refugee Development Center in Lansing, said his center helps educate relocated families and individuals. "We try to equip them with the skills they need to find jobs," he said.

Refugee resettlement is important to help revitalize Lansing's economy, he said.

Refugees are bringing skills to the work force and investing in the city, Delgado said.

"Studies show that about five years after refugees are resettled into a community, their debt to society has paid off and for the rest of their lives, their being here is helping the economy because they are paying into it through taxes and living expenses," he said.

When a new refugee comes to Lansing, the housing is paid for by the federal government for six months, officials say.

"When refugees come in from their countries, the U.S. government stipulates that in six months time they must be come financially independent," Reynolds said.

Contact Lindsay Machak at 377-1157 or lmachak@lsj.com.

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THE ANN ARBOR NEWS

LESA aims to supply backpacks for needy

5th annual drive provides the right stuff for school

Friday, August 03, 2007

News Staff Reporter

New backpacks, crayons, notebooks and folders make saying good-bye to summer vacation and hello to the start of school a little easier for students, and the Livingston Educational Service Agency doesn't want any child to miss out.

The group's fifth annual "Fill Backpacks for Kids" is under way. The project provides Livingston County students in need with free backpacks of basic school supplies.

"We know there's going to be a big demand this year, given the economy we have," said Jean Garratt, LESA's director of early childhood programs. "We're already getting calls from people asking when we'll have supplies."

The drive continues through Friday, Aug. 17. Contributions can be dropped off at the LESA Education Center, 1425 W. Grand River Ave. in Howell, from 7:30 a.m. to 3:30 p.m. Monday through Friday. They also are being accepted at all county Citizens Bank locations and Preview Properties, 130 W. Grand River Ave., Brighton. While cash is OK, Garratt said donations of actual school supplies makes the drive run more smoothly. Supply distribution will be 4 to 6:30 p.m. Thursday, Aug. 23, at the education center.

More than 1,000 filled backpacks were given to county students last year, up from 600 the year before.

"We see the need growing every year," Garratt said.

The Brighton Rotary Club is taking the program on as one of its "Good Deed Doer" projects for the second year in a row. Members already are bringing donations to the group's weekly meetings, said Mitch Zoldowski, club secretary.

"This is a great project," Zoldowski said. "It supports our local community and helps our local kids in need, and that's what Rotary is all about. We love doing this."

Donations come from civic organizations and businesses, as well as from grandparents, moms and dads and other children. They've even come from people who once received a backpack of supplies and want to return the favor, Garratt said.

"The generosity and the community response is amazing," she said. "This community really wraps itself around helping out those in need. It's very touching."

A list of needed school supplies can be found on the LESA Web site, www.lesa.k12.mi.us. More information is available at 517-540-6833.

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